

08-29-00

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Atty. Dkt. No. 44123/1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Travers et al

Title: DISH DRAINER AND TRAY
SYSTEM WITH COMPACT
STORAGE OF THE TRAY

Appl. No.: Not Yet Assigned

Filing Date: Unknown

Examiner: Unknown

Art Unit: Unknown

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.	
EL640465573US	8/28/2000
(Express Mail Label Number)	(Date of Deposit)
Shirley Miksa	
(Printed Name)	
Shirley Miksa	
(Signature)	

UTILITY PATENT APPLICATION
TRANSMITTAL

Assistant Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

John Travers
Vince Haley
Sean Michael O'Brien
Christopher Gilbert

Enclosed are:

- ☒ [X] Specification, Claim(s), and Abstract (12 pages).
- ☒ [X] Informal drawings (5 sheets, Figures 1-5).
- ☐ [] Declaration and Power of Attorney (___ pages).
- ☐ [] Assignment of the invention to RUBBERMAID INCORPORATED.
- ☐ [] Assignment Recordation Cover Sheet.
- ☐ [] Check in the amount of \$40.00 for Assignment recordation.
- ☐ [] Small Entity statement.
- ☒ [X] Information Disclosure Statement.

☒ Form PTO-1449 with copies of 9 listed reference(s).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$690.00	\$690.00
Total Claims:	17	- 20	= 0	x \$18.00	= \$0.00
Independents:	2	- 3	= 0	x \$78.00	= \$0.00
If any Multiple Dependent Claim(s) present:				+ \$260.00	= \$0.00
				SUBTOTAL:	= \$690.00
<input type="checkbox"/> Small Entity Fees Apply (subtract 1/2 of above):					= \$0.00
				TOTAL FILING FEE:	= \$690.00

- ☐ A check in the amount of \$690.00 to cover the filing fee is enclosed.
- ☒ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☐ The Assistant Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Assistant Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date August 28, 2000

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